COMPLETE IF KNOWN INFORMATION DISCLOSURE STATEMENT BY APPLICANT 10/521,622 Application Number Confirmation Number 2017 Filing Date January 14, 2005 Form PTO-1449 (Modified) First Named Inventor Hagio et al. (Use several sheets if necessary) 1651 Group Art Unit **Examiner Name** Fnandez, Susna Emily Sheet 1 of 1 Attorney Docket No. 59150-8030

				U.S. P	ATENT DOCUMENTS			
Examiner Initials*	Cite No	е	S. Patent or Application Kind Cod BER (if know		ame of Patentee or Inventor of Cited Document	Date of Publication or Filing Date of Cited Document	Pages, Columns, Lines, Where Relevant Passages o Relevant Figures Appear	
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	1.	PCT	WO 00/63408	A2/A3	Trazeneca AB	10-26-2000		
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